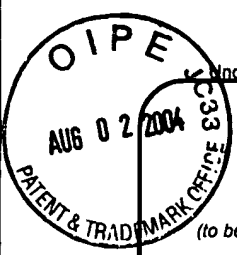


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(to be used for all correspondence after initial filing)

Application Number	10/658,157
Filing Date	September 9, 2003
First Named Inventor	Neary, David Lloyd
Art Unit	1724
Examiner Name	Spitzer, Robert H.
Attorney Docket Number	
Total Number of Pages in This Submission	2

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
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<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="text"/> Remarks	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	DARIN M. KLEMCITUK		
Signature			
Date	29 JUL. 04		

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Application Number	10/658,157
Filing Date	September 9, 2003
First Named Inventor	Neary, David Lloyd
Title	Pure Vacuum Swing Adsorption
Art Unit	1724
Examiner Name	Spitzer, Robert H
Attorney Docket Number	

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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	David Lloyd Neary		
Signature	<i>David Lloyd Neary</i>		
Date	July 25, 2004	Telephone	469-892-1321

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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